

The Ulster Medical Journal

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Belfast Clinical and Pathological Society (1854-1862)

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The Ulster Medical Society was founded in 1862
by the amalgamation of the Belfast Medical Society (founded 1806)
and the Belfast Clinical and Pathological Society (founded 1853)

THE ULSTER MEDICAL JOURNAL

NOTICE TO CONTRIBUTORS

1. Authors are reminded that concise and clearly expressed papers are those most welcomed by readers and the Editorial Board. All manuscripts are independently refereed.

All manuscripts should be accompanied by a covering letter signed by all the authors agreeing to publication and stating that the work has not been published elsewhere, also stating that they have been actively involved in the preparation of the paper.

2. Manuscripts should be typewritten in double spacing, with wide margins. They should be fully corrected and alterations in proof may be disallowed or charged to the author. A sample typescript showing layout is available on request from the editorial office. Three copies of each manuscript should be submitted, including tables and figures.
3. The text should indicate the purpose of the paper, and should include an introduction, sections on materials and methods, results, and a discussion relevant to the findings. A brief factual summary should be provided at the beginning of the paper.
4. Scientific measurements should be in SI units (*Units, symbols and abbreviations; a guide for biological and medical editors and authors*, 3rd ed. London: Royal Society of Medicine, 1977). Blood pressure may be expressed in mmHg and haemoglobin concentration as g/dl.
5. Tables must be kept simple and vertical lines should be avoided. Tables and illustrations must be kept to a minimum and data should not be given in both text and tables. Line drawings should be used where possible and symbols must be large enough to be legible when reduced to text size. Where possible, size of illustrations and tables should be planned so that one or more can easily fit the page size of 19.5 x 12.5 cm. Photographs and other illustrations should be unmounted, and authors may be charged for these at cost price. Authors' names and the top of the figure should be marked in soft pencil on the back.
6. References should be restricted to those really necessary and useful. This journal uses the 'Vancouver' style (see *British Medical Journal* 1982; 1: 1766 -70 and *Lancet* 1979; 1: 429 - 30). Text references are numerical. Each reference should include:
 - i) a list of all authors when six or less (when seven or more only the first three should be listed followed by *et al*).
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eg

McCoy GF, Dilworth GR, Yeates HA. The treatment of trochanteric fractures of the femur by the Ender method. *Ulster MedJ* 1983; 52: 136-41.

Book references should give the author, title, edition, town of publication, name of publisher, year of publication, and, where appropriate, volume and page numbers.

7. Ten reprints of each article will be forwarded free of charge to the corresponding author. Further reprints can be obtained from the printers, Messrs Dorman & Sons Ltd, 1-3 Holmes Street, Belfast BT2 7JG, who should be approached directly.
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flowing style and in an easily digestible format. It contains a good deal of useful information, bringing together the principles of advanced life support, and a guide to the diagnosis and management of fractures (occupying five of the 15 chapters). The book also encompasses the epidemiology and control and prevention of injury as separate chapters. The text is written from the perspective of individual injuries, and covers in some detail and in a logical and methodical manner the cause of injury, and assessment and treatment of injured children. Throughout the book the differential diagnosis of non accidental injury recurs and the importance of recognition of history and pattern of injury is emphasised. There is a useful section on child abuse and guidance on the preparation of medico-legal evidence. The book is comprehensively illustrated with tables, line drawings and photographs. However some of the subject matter is based upon individual practice and in particular a section on Bier Block regional anaesthesia for the reduction of limb fractures using Lignocaine at a dose of 3 mg/kg could not be considered standard practice, particularly by an inexperienced SHO.

Since it is clearly aimed at that particular audience, I have gathered the views of my own A&E SHOs. All found the book readable, one describing its style as "like a novel". The consensus view was that the book would be useful in the on-call room as general reading, but not suitable for the white coat pocket. In particular the sections on fracture management were commended as being comprehensive and useful.

This text is a useful resource for those whose practice may involve the assessment or treatment of injured children and as such would be valuable reading for an A&E SHO. Because of its style and size it is not a rapid reference guide but rather should be viewed as preparatory reading. Those contemplating the purchase of this book should also consider Paediatric Emergencies by Beattie, Hendry & Duguid (Mosney Wolfe, 1997: ISBN 0 7234 1673 7).

L A McKINNEY

Endocrine Autoimmunity and Associated Conditions.

Edited by Anthony Weetman. 1998 Kluwer Academic Publishers. pp 292. ISBN 0 7923 5042 1.

Autoimmunity owes much to endocrinology for helping to clarify and establish this basic principle of disease pathogenesis which has subsequently been realised to be applicable to many other diseases. Equally, as a concept, it has continued to provide a tantalising research challenge to immunologist, geneticist and clinician alike. Undoubtedly we have come a long way over the last four decades since autoimmunity was postulated as the aetiological agent in experimental and human autoimmune thyroiditis, and since the formal documentation of insulinitis in short duration IDDM patients in 1965.

This book seeks to present advances in our understanding of the immunology of endocrine autoimmunity within the framework of a coherent and cohesive text not readily available from other single sources. It deals primarily with two major endocrine disorders: thyroid disease and type 1 diabetes mellitus. Under thyroid disorders, there is an initial chapter on animal models of autoimmune thyroiditis followed by chapters on thyroid autoantigens, autoimmune autoantigens, Graves' disease, postpartum thyroiditis and thyroid-associated

exophthalmopathy. Discussion on diabetes focuses around beta cell antigens and the aetiology and pathogenesis of type 1 diabetes. Of considerable interest are 5 remaining chapters on rather more miscellaneous conditions including Addison's disease and related polyglandular endocrinopathies, premature ovarian failure, pituitary autoimmunity, pernicious anaemia and vitiligo. In each chapter, the aetiology, pathogenesis and treatment are discussed in detail. The book clearly highlights some of the more problematic areas such as thyroid exophthalmopathy, treatment of which must be accompanied by elucidation of disease pathogenesis.

Does the book succeed in its goals? It certainly provides an authoritative and informative update on a variety of immunologically mediated diseases by a series of respected national and international authors. Every chapter in the book discusses new developments, but they also clearly define limits of knowledge. Within a single volume it offers information which would only otherwise be obtained with difficulty and much searching of the literature. Perhaps the photographs could have been improved and presented in colour as the quality of micrographs, X-rays and bar diagrams is poor. An additional chapter on methodological pitfalls in interpretation of laboratory assays caused by interfering proteins such as thyroid assays and macroprolactin would have been helpful.

The book is a reference tool for a library or departmental bookshelf rather than perhaps a personal collection. It is one of a planned series of books covering specialist areas of medicine with diseases of immunological importance and aiming to provide a continuous update over a 4 year cycle. It may be that a CD ROM tool would facilitate this learning. I have no doubt however that the editors will succeed in their goals.

DAVID R McCANCE

BOOK RECEIVED

Strength and Compassion in Kidney Failure. Barrie Friedman. Kluwer Academic Publishers. £61. ISBN 0 7923 5235 1. Published 27.08.98.

During 1998 the following acted as independent referees:

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THE ULSTER MEDICAL SOCIETY

Whitla Medical Building

97 Lisburn Road

Belfast BT9 7BL

If you are not a member of the Ulster Medical Society, we would appeal to you to give the question of joining your consideration. The Society was formed in 1862 through the amalgamation of the Belfast Medical Society (founded in 1806 and revived in 1822) and the Belfast Clinical and Pathological Society (founded in 1853). Meetings are held in the Society's room in the Whitla Medical Building at fortnightly intervals from the autumn to the spring. There is an opportunity to meet informally after each lecture and enjoy a cup of tea. *The Ulster Medical Journal*, the official organ of the Ulster Medical Society, is issued to all Fellows and Members free of charge.

By joining the Ulster Medical Society you will enable us to widen its influence and sphere of usefulness still further. The only requirement is that you should be registered under the Medical Acts. A proposal form will be found overleaf. Your proposer and seconder should belong to the Society. Please contact the Honorary Secretary if you do not know any members. The annual subscription is claimable against income tax.

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